

5. Dates of Expense: From 7-10-95 To 7-14-95

Printed in U.S.A.

2. Name (Last, First, MI)
MARKYVECH, RONALD, K.

3. Div/Dept. No. 039 / 380

4. Report No.

5. Dates of Expense: From 7-13-95 To 7-14-95

| | Sun | Mon | Tues | Wed | Thurs | Fri | Sat | Total |
|--|-----|-----|------|-----|---------------------|---------|-----|-------|
| 6. Date | | | | | 7-13-95 | 7-14-95 | | |
| 7. City | | | | | BATTLE CRY. CHILSEA | | | |
| State/Country | | | | | MS | MS | | |
| 8. Meals | | | | | 16 00 | 20 34 | | 36 34 |
| 9. Incidentals | | | | | | | | |
| 10. Hotel/Motel | | | | | 41 91 | | | 41 91 |
| 12. Accounting Use Only | | | | | | | | |
| County Code | | | | | | | | |
| Per Diem Rate | | | | | | | | |
| Variance | | | | | | | | |
| 13. Telephone | | | | | 3 54 | | | 3 54 |
| 14. Taxi, Auto Rental, Local Transp. | | | | | | | | |
| Rate _____ per mile (miles) | () | () | () | () | () | () | () | () |
| Auto Expense Personal <input type="checkbox"/> Leased <input type="checkbox"/> | | | | | | | | |
| 16. Employee Purchased Transp. | | | | | | | | |
| 17. *Entertainment | | | | | | | | |
| 18. Parking | | | | | | | | |
| 19. *Guest Meals | | | | | | | | |
| 20. Company Paid Transportation | | | | | | | | |
| 21. Leased Car Maint. (Detail Over) | | | | | | | | |
| 22. *Other | | | | | | | | |
| 23. Total Expense | | | | | 61 45 | 20 34 | | 81 79 |

Account Distribution:

| Div. | Gr | Cl | Sub | Dept | Prod | Source | Amount |
|-------|----|----|-----|------|------|---------|--------|
| | 14 | 09 | 900 | | | 6182-01 | 45.41 |
| | | | 905 | | | | |
| | 4 | | 907 | | | 2 | 36.34 |
| | | | 920 | | | | |
| Total | | | | | | | 81.79 |

Advances:

(Cash, Check, Hotel deposits)

Company paid transportation

Carry over from previous report (if applicable)

Amount due employee
Amount due company

0

0

0

81 79

Purpose of Trip: PROJECT 6182-01, Took AutoSplit Concept Truck to TCONA'S

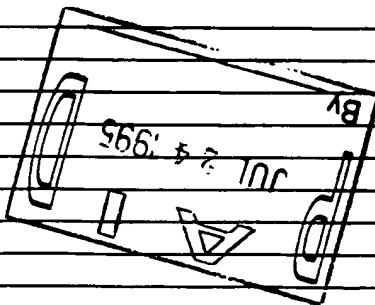
TRUCK Demo AND "Automation STRATEGIC PLANNING MEETING".

*Explain Expenditures Above By Day:

Sunday: _____

Monday: _____

Tuesday: _____



Wednesday: _____

Thursday: LINE #8 PURCHASED DINNER FOR TOM CANINE AND MYSELF.

Friday: LINE #8 PURCHASED DINNER FOR TOM CANINE AND MYSELF.

Saturday: _____

This is a true statement of all expenses incurred by me on behalf of the company for the period indicated.

Ronald K. Markyvech
Employee Signature

7-15-95
Date

Authorized For Reimbursement

John
Approved

7/24/95
Date